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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	
Filing Date	
First Named Inventor	Glen E. Southard
Title	Processable Molecularly Imprinted Polymers
Art Unit	
Examiner Name	
Attorney Docket Number	2087-1331

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number:

26085

OR

☐ Practitioner(s) named below:

Name	Registration Number
Francis A. Cooch	31,495
Albert J. Fasulo, II	43,607
Benjamin Y. Roca	50,166

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☒ The address associated with the above-mentioned Customer Number:

OR

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26085

OR

<input type="checkbox"/> Firm or Individual Name	The Johns Hopkins University Applied Physics Laboratory				
Address	11100 Johns Hopkins Rd				
City	Laurel	State	Maryland	Zip	20723-6099
Country	U.S.A.				
Telephone	240-228-5640	Email	Frank.Cooch@jhuapl.edu		

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Signature		Date	09-15-06
Name	Glen E. Southard	Telephone	435-615-0067
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 2 forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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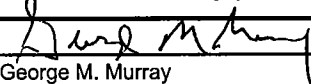
<input type="checkbox"/> Firm or Individual Name	The Johns Hopkins University Applied Physics Laboratory				
Address	11100 Johns Hopkins Rd				
City	Laurel	State	Maryland	Zip	20723-6099
Country	U.S.A.				
Telephone	240-228-5640	Email	Frank.Cooch@jhuapl.edu		

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SIGNATURE of Applicant or Assignee of Record

Signature		Date	9/15/86
Name	George M. Murray	Telephone	240-228-3882
Title and Company			

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